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LTyson
4/28/04**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicants: Jacquelyn A. Martino, et al. **Examiner:** Kimnhung T. Nguyen
Serial No: 09/739,512 **Art Unit:** 2674
Filed: December 18, 2000 **Docket:** US000363 (16196)
For: ADAPTABLE REMOTE **Confirmation No.:** 3118
CONTROL WITH
EXCHANGEABLE CONTROLS **Dated:** April 14, 2004

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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APR 22 2004

Technology Center 2600

RESPONSE

Sir:

In response to the Official Action dated February 12, 2004, Applicants respectfully request reconsideration of the above-identified application in light of the following remarks.

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail stop Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on April 14, 2004.

Dated: April 14, 2004


Thomas Spinelli

2674

AMENDMENT TRANSMITTAL LETTER (Large Entity)

Applicant(s): Jacquelyn A. Martino, et al

Docket No.

US000363 (16196)

Serial No.

09/739,512

Filing Date

December 18, 2000

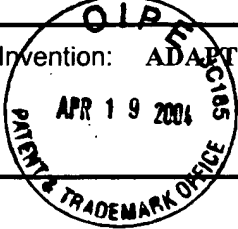
Examiner

Kimnhung T. Nguyen

Group Art Unit

2674

Invention: ADAPTABLE REMOTE CONTROL WITH EXCHANGEABLE CONTROLS



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APR 22 2004

TO THE COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.

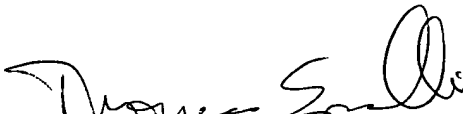
The fee has been calculated and is transmitted as shown below.

Technology Center 2600

CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	19 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	5 -	5 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00

- ☒ No additional fee is required for amendment.
- ☐ Please charge Deposit Account No. _____ in the amount of _____
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☒ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. **19-1013/SSMP**
 - ☒ Any additional filing fees required under 37 C.F.R. 1.16.
 - ☐ Any patent application processing fees under 37 CFR 1.17.

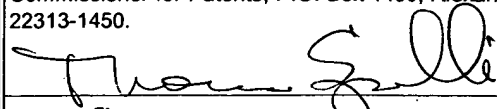

Signature

Dated: April 14, 2004

Thomas Spinelli, Esq.
Reg. No. 39,533

Correspondence Address
Customer No.: 23389

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Signature

Thomas Spinelli

Typed or Printed Name

cc:

TS:WAP:jf